POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		1089	9/28/01
RESPONSE FORMALITY REVIEW		1019	12.12.01

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date	Claim		Date	Claim		Date
Final	Original		Final	Original		Final	Original	
	1			51			101	
	2			52			102	
	3			53			103	
	4			54			104	
	5			55			105	
	6			56			106	
	7			57			107	
	8			58			108	
	9			59			109	
	10			60			110	
	11			61			111	
	12			62			112	
	13			63			113	
	14			64			114	
	15			65			115	
	16			66			116	
	17			67			117	
1	18			68			118	
2	19			69			119	
3	20			70			120	
4	21			71			121	
5	22			72			122	
6	23			73			123	
7	24			74			124	
8	25			75			125	
9	26			76			126	
10	27			77			127	
11	28			78			128	
12	29			79			129	
13	30			80			130	
14	31			81			131	
15	32			82			132	
16	33			83			133	
17	34			84			134	
18	35			85			135	
19	36			86			136	
20	37			87			137	
21	38			88			138	
22	39			89			139	
23	40			90			140	
24	41			91			141	
25	42			92			142	
26	43			93			143	
27	44			94			144	
	45			95			145	
	46			96			146	
	47			97			147	
	48			98			148	
	49			99			149	
	50			100			150	

If more than 150 claims or 10 actions
staple additional sheet here

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